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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/779,095			ing Date 08/2001	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
	FOR	N	UMBER FIL	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), 4	or (m))	N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*		x \$ =		OR	x \$ =		
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	m	inus 3 = *			x \$ =		1	x \$ =		
If the specification and drawings excess heets of paper, the application size to \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereous \$35 U.S.C. 41(a)(1)(G) and 37 CFR 1.					n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									Į			
* If the difference in column 1 is less than zero, enter *0" in column 2.							TOTAL		J	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAMMS HIGHEST												
AMENDMENT	12/21/2010	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	⁺ 56	Minus	 61	= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	* 6	Minus	***7	= 0		x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))	*	Minus	*	=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))		Minus	***	=		x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					l			Į			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.								etrument Ev	OR (amin	TOTAL ADD'L FEE		
** If	"If the entry in column 1 is less than the entry in column 2, write "or column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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